

MARYLAND HISTORICAL TRUST WORKSHEET

CE 380  
0803805504

NOMINATION FORM  
for the  
NATIONAL REGISTER OF HISTORIC PLACES, NATIONAL PARKS SERVICE

SEE INSTRUCTIONS

<b>1. NAME</b>				
COMMON: <u>Mary Brunner's house</u>				
AND/OR HISTORIC: _____				
<b>2. LOCATION</b>				
STREET AND NUMBER: <u>East Market Street near Bladen, south side</u>				
CITY OR TOWN: <u>Charleston</u>				
STATE: <u>Maryland</u>		COUNTY: <u>Cecil</u>		
<b>3. CLASSIFICATION</b>				
<b>CATEGORY</b> (Check One) <input type="checkbox"/> District <input checked="" type="checkbox"/> Building <input type="checkbox"/> Site <input type="checkbox"/> Structure <input type="checkbox"/> Object		<b>OWNERSHIP</b> <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> Both		<b>STATUS</b> <input checked="" type="checkbox"/> Occupied <input type="checkbox"/> Unoccupied <input type="checkbox"/> Preservation work in progress
<b>ACCESSIBLE TO THE PUBLIC</b> Yes: <input checked="" type="checkbox"/> Restricted <input type="checkbox"/> Unrestricted <input type="checkbox"/> No				
<b>PRESENT USE (Check One or More as Appropriate)</b> <input type="checkbox"/> Agricultural <input type="checkbox"/> Government <input type="checkbox"/> Park <input type="checkbox"/> Transportation <input type="checkbox"/> Comments <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Private Residence <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Educational <input type="checkbox"/> Military <input type="checkbox"/> Religious _____ <input type="checkbox"/> Entertainment <input type="checkbox"/> Museum <input type="checkbox"/> Scientific _____				
<b>4. OWNER OF PROPERTY</b>				
OWNER'S NAME: <u>Mary Brunner</u>				
STREET AND NUMBER: <u>Market &amp; Bladen Streets</u>				
CITY OR TOWN: <u>Charleston</u>		STATE: <u>MD.</u>		
<b>5. LOCATION OF LEGAL DESCRIPTION</b>				
COURTHOUSE, REGISTRY OF DEEDS, ETC.: <u>Clerk of the Circuit Court</u>				
STREET AND NUMBER: <u>Cecil County Courthouse</u>				
CITY OR TOWN: <u>Elkton</u>		STATE: <u>MD.</u>		
Title Reference of Current Deed (Book & Pg. #): _____				
<b>6. REPRESENTATION IN EXISTING SURVEYS</b>				
TITLE OF SURVEY: _____				
DATE OF SURVEY: _____ <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Local				
DEPOSITORY FOR SURVEY RECORDS: _____				
STREET AND NUMBER: _____				
CITY OR TOWN: _____		STATE: _____		

## 7. DESCRIPTION

CONDITION	(Check One)					
	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Deteriorated	<input type="checkbox"/> Ruins	<input type="checkbox"/> Unclassified
	(Check One)			(Check One)		
	<input type="checkbox"/> Altered	<input type="checkbox"/> Unaltered	<input type="checkbox"/> Moved	<input type="checkbox"/> Original Site		

DESCRIBE THE PRESENT AND ORIGINAL (If known) PHYSICAL APPEARANCE

This frame house has aluminum "clapboard" siding over asphalt shingle over clapboard.

L shaped, it faces north in side-hall plan, with the wing of brick running south along the west side wall. Brick is painted.

3 bays by 2 with 1 bay by 1 in the wing. The roof/ridge runs east west over the main house. The roof over the wing is flat.

The west wall (and the end wall of the wing) have chimneys rising inside to the peak.

SEE INSTRUCTIONS

## 8. SIGNIFICANCE

## PERIOD (Check One or More as Appropriate)

- ☐ Columbian      ☐ 16th Century      ☐ 18th Century      ☐ 20th Century  
☐ 15th Century      ☐ 17th Century      ☐ 19th Century ?

## SPECIFIC DATE(S) (If Applicable and Known)

## AREAS OF SIGNIFICANCE (Check One or More as Appropriate)

- |   |                                      |   |  |
|---|--------------------------------------|---|--|
| <input type="checkbox"/> Aboriginal     | <input type="checkbox"/> Education   | <input type="checkbox"/> Political      | <input type="checkbox"/> Urban Planning  |
| <input type="checkbox"/> Prehistoric    | <input type="checkbox"/> Engineering | <input type="checkbox"/> Religion/Phi-  | <input type="checkbox"/> Other (Specify) |
| <input type="checkbox"/> Historic       | <input type="checkbox"/> Industry    | lasophy                                 | _____                                    |
| <input type="checkbox"/> Agriculture    | <input type="checkbox"/> Invention   | <input type="checkbox"/> Science        | _____                                    |
| <input type="checkbox"/> Architecture   | <input type="checkbox"/> Landscape   | <input type="checkbox"/> Sculpture      | _____                                    |
| <input type="checkbox"/> Art            | Architecture                         | <input type="checkbox"/> Social/Human-  | _____                                    |
| <input type="checkbox"/> Commerce       | <input type="checkbox"/> Literature  | itorion                                 | _____                                    |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Military    | <input type="checkbox"/> Theater        | _____                                    |
| <input type="checkbox"/> Conservation   | <input type="checkbox"/> Music       | <input type="checkbox"/> Transportation | _____                                    |

## STATEMENT OF SIGNIFICANCE

Made into a very liveable house  
by a family whose income comes  
from an Elkton shop.

SEE INSTRUCTIONS

9. MAJOR BIBLIOGRAPHICAL REFERENCES

10. GEOGRAPHICAL DATA

LATITUDE AND LONGITUDE COORDINATES DEFINING A RECTANGLE LOCATING THE PROPERTY			O R	LATITUDE AND LONGITUDE COORDINATES DEFINING THE CENTER POINT OF A PROPERTY OF LESS THAN TEN ACRES		
CORNER	LATITUDE	LONGITUDE		LATITUDE	LONGITUDE	
NW	Degrees Minutes Seconds ° ' "	Degrees Minutes Seconds ° ' "		Degrees Minutes Seconds ° ' "	Degrees Minutes Seconds ° ' "	
NE	° ' "	° ' "				
SE	° ' "	° ' "				
SW	° ' "	° ' "				

APPROXIMATE ACREAGE OF NOMINATED PROPERTY:

Acreage Justification:

LIST ALL STATES AND COUNTIES FOR PROPERTIES OVERLAPPING STATE OR COUNTY BOUNDARIES

STATE:		COUNTY:	
STATE:		COUNTY:	
STATE:		COUNTY:	
STATE:		COUNTY:	

11. FORM PREPARED BY

NAME AND TITLE:	
ORGANIZATION	DATE
STREET AND NUMBER:	
CITY OR TOWN:	STATE

12. State Liaison Officer Review: (Office Use Only)

Significance of this property is:

National ☐ State ☐ Local ☐

Signature \_\_\_\_\_

SEE INSTRUCTIONS





CE- 380

Northernan House

Charlestown

Geoffrey Henry 3/85





CE-380

Northerman House

Charlestown

Christopher Weeks 6/84

Negatives at MHT

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